



WFC

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/082,599
Filing Date	February 22, 2002
First Named Inventor	Craig M. Carpenter
Art Unit	1763
Examiner Name	Karla A. Moore
Attorney Docket Number	MI22-1941

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Return Receipt Postcard Check for \$100.00 Request for Certificate of Correction - Applicant Mistake Certificate of Correction in duplicate
<input type="checkbox"/> Remarks Customer No. 021567 Patent No. 6,800,172 B2 Issued October 5, 2004		

Certificate
SEP 29 2005
of Correction

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wells St. John P.S.		
Signature			
Printed name	Mark S. Matkin		
Date	9-22-05	Reg. No.	32,268

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Lori D. Paulus	Date	9-22-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No 6,800,172 B2
Patent Issue Date October 5, 2004
Application Serial No. 10/082,599
Filing Date February 22, 2002
Assignee Micron Technology, Inc.
Inventorship..... Craig M. Carpenter et al.
Attorney's Docket No. MI22-1941
Title: Interfacial Structure for Semiconductor Substrate Processing Chambers
and Substrate Transfer Chambers and for Semiconductor Substrate
Processing Chambers and Accessory Attachments, and Semiconductor
Substrate Processor

REQUEST FOR CERTIFICATE OF CORRECTION OF PATENT FOR APPLICANT'S MISTAKE (37 C.F.R. 1.323)

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

ATTN: **Decision and Certificate of Correction**
Branch of the Patent Issue Division

From: Mark S. Matkin (Tel. 509-624-4276; Fax 509-838-3424)
Wells St. John P.S.
601 W. First Avenue, Suite 1300
Spokane, WA 99201-3828

Sir:

It is hereby requested that a Certificate of Correction be issued with respect to Patent No. 6,800,172, granted October 5, 2004, in accordance with the Certificate of Correction form attached hereto in duplicate.

It is noted that an error appears in this patent of a typographical nature of character, as more fully described below. The error occurred in good faith. Correction thereof does not involve such changes in the patent as would constitute new matter or would require re-examination.

09/27/2005 MBIZUNES 00000003 6800172
01 FC:1811
100.00 OP
S:\MI22\1941\CR4.doc A270509211100N

Attached hereto, in duplicate, is Form PTO-1050, with at least one copy being suitable for printing.

The exact page and line number where the error occurs in the application file are:

Page 9, Line 8

Enclosed is a check in the amount of \$100.00, as required by 37 CFR 1.20(a).

Respectfully submitted,

Dated: 9-22-05

By: 
Mark S. Matkin
Reg. No. 32,268

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\\$)	100.00
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Complete if Known

Application Number	10/082,599
Filing Date	February 22, 2002
First Named Inventor	Craig M. Carpenter
Examiner Name	Karla A. Moore
Art Unit	1763
Attorney Docket No.	MI22-1941

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: Wells St. John P.S.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity Fee (\$)
50
200
360

Fee (\$)	Fee Paid (\$)
25	
100	
180	

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP =	x	=		<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		=

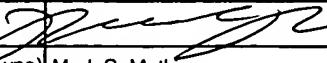
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Certificate of Correction - Applicant Mistake

100.

SUBMITTED BY

Signature 	Registration No. (Attorney/Agent) 32,268	Telephone (509) 624-4276
Name (Print/Type) Mark S. Matkin	Date <u>9-22-05</u>	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION

PATENT NO. : 6,800,172 B2

DATED : October 5, 2004

INVENTOR(S) : Craig M. Carpenter et al.

It is certified that errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Column 4, line 26, replace "one" with --only--.

Page
1 of 1

Mailing Address of Sender:
Wells St. John P.S.
601 West First Avenue, Suite 1300
Spokane, WA 99201-3828

Patent No. 6,800,172 B2

UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION

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DATED : October 5, 2004

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